MAY 0 9 2011



STATE OF WASHINGTON APPLICATION FOR CHANGE/TRANSFER ARTIMENT OF ECOLOGY - CENTRAL REGIONAL OFFICE **OF WATER RIGHT**

For filing with the Department of Ecology or with County Conservancy Boards

A NON-REFUNDABLE MINIMUM FEE OF \$50.00 PAYABLE TO THE DEPARTMENT OF **ECOLOGY MUST ACCOMPANY THIS APPLICATION**

(Check all that apply.) Change purpose(s) of use Add purpose(s) of use Change point(s) of diversion/withdrawal Add point(s) of diversion/withdrawal X Change/transfer place of use Other (i.e. consolidation, intertie, trust water) Explain:	E	FOR OFFICE USE ONLY CHANGE No.			
**IF MORE SPACE IS NEEDED, ATTACH ADD					
1. Applicant Information:					
APPLICANT/BUSINESS NAME		PHONE NO.	FAX NO.		
Water Works Properties L.L.C.		(509) 665-6600	()		
ADDRESS					
One Fifth Street, Suite 300					
CITY		STATE	ZIP CODE		
Wenatchee		WA	98801		
CONTACT NAME (IF DIFFERENT FROM ABOVE)		PHONE NO.	FAX NO.		
John McQuaig		(509) 665-6600			
ADDRESS					
One Fifth Street, Suite 300					
CITY		STATE	ZIP CODE 98801		
Wenatchee		WA			
LEGAL LAND OWNER or PART OWNER NAME OF PROPOSED PL	PHONE NO.	FAX NO.			
Same as Applicant					
ADDRESS					
CITY		CTATE	710 0005		
CITY		STATE	ZIP CODE		
2. Water Right Information:					
WATER RIGHT OR CLAIM NUMBER	RECORDED				
S4-29943C	D. and Joy Cox				
DO YOU OWN THE RIGHT TO BE CHANGED? X YES NO					
IF NO, PROVIDE OWNER(S) NAME and ADDRESS:					
HAS THE WATER BEEN PUT TO BENEFICIAL USE IN THE LAST F	IVE (5) YEARS	? X YES NO			
Please attach copies of any documentation that den was established. Also, if you have a water system papplication. SEE Declaration of Dan Cox attached here	lan or cons				
34-29943 GWRIS FOR OFFIC	CE USE ON	LY			
APP. NO PERMIT NO CER CSY-299	RT. NO	CERT. OF CHAN	IGE NO		

Point(s) of Diversion/Withdrawal: WELL TAG # SOURCE NO. 1/4 1/4 SEC TWP RGE. PARCEL# Columbia River 8 26 **22E** 26220820002 B. Proposed SOURCE NO. 1/4 SEC. TWP. PARCEL# **WELL TAG #** 1/4 RGE Same DO YOU OWN THE EXISTING AND PROPOSED POINT(S) OF DIVERSION/WITHDRAWAL? EXISTING: YES X NO PROPOSED: YES X NO - IF NO, PROVIDE OWNER(S) NAME: Earl and Kathy Drinkwater Please include copies of all water well reports involved with this proposal. Also, if you know the distances from the nearest section corner to the above point(s) of diversion/withdrawal, please include that information in Item No. 6 (remarks) or as an attachment. 4. Purpose of Use: A. Existing **PURPOSE OF USE GPM or CFS** ACRE-FT/YR PERIOD OF USE Irrigation, Frost Control & Stock Water 418.5 April 1 – October 1 B. Proposed **PURPOSE OF USE GPM or CFS** ACRE-FT/YR PERIOD OF USE Same 5. Place of Use: A. Existing LEGAL DESCRIPTION OF LANDS WHERE WATER IS PRESENTLY USED: The southeast quarter of Section 7, TS 26 N, R 22, E.W.M., Douglas County. SEC. COUNTY PARCEL# # OF ACRES TWP. 26220740000 DO YOU OWN ALL THE LANDS IN THE EXISTING PLACE OF USE? X YES NO - IF NO, PROVIDE OWNER(S) NAME: B. Proposed LEGAL DESCRIPTION OF LANDS WHERE NEW USE IS PROPOSED: The southeast quarter of Section 7 and the North half of the NE 1/4 of Section 18, all lying In TW 26 N, R 22, E.W.M., Douglas County, Washington. SEC. PARCEL# 1/4 1/4 TWP. RGE COUNTY # OF ACRES 26221810002 & 26220740000 DO YOU OWN ALL THE LANDS IN THE PROPOSED PLACE OF USE? X YES NO - IF NO, PROVIDE OWNER(S) NAME: Attach a detailed map of your proposed change/transfer. The map should show existing and proposed point(s) of diversion/withdrawal, place of use and any other features involved with this application. If platted property, please include a certified copy of the plat map. Are there any ADDITIONAL WATER rights OR CLAIMS RELATED to the same property as the ONE PROPOSED FOR CHANGE/TRANSFER?

YES NO - IF YES, PROVIDE THE WATER RIGHT/CLAIM NUMBER(S):

nted the orchards that are present on the poy of which is attached hereto, and provide ached hereto. He was issued a permit, a comit are both for water to irrigate 100 acres process, he neglected to include the complete legal description of the property that dvertently omitted. This Change Application tinuously applied to the orchards since the	es the proposed place of use in approximate property today. He submitted an application of appropriation of water, a copy opy of which is attached hereto. The application. Mr. Cox actually owned about 97 acres. It plete legal description of the property that out constituted the place of use of the water. On is submitted to correct that oversight. They were planted in their present locations are oversight in including the entire property	n for a permit, a also of which is ation and the Unfortunately, in constituted the A parcel was The water has been and this Change
OR SEASONAL OR TEMPORARY, START DATE/_		
	Excise Tax liability for the seller of the water atial taxable water right related actions and the	
	ue for further information. The phone numb Estate Excise Tax, PO Box 47477, Olympia	
Signatures:		
order to process my application, I am her Conservancy Board access to the above s	e and accurate to the best of my knowledge reby granting staff from the Department of site(s) for inspection and monitoring purponderstand that all responsibility for the acc	Ecology or the Cou ses. If assisted in th
Cicant Signature) By: JOHN D. MCQUAIG	(Applicant Signature)	4/4/4 (Date)
Illiam Day G	(Water Right Holder)	<u>4//// //</u> (Date)
M. Mumba	(Land Owner(s) of Proposed Place of Use)	(Date)
IMPORTANT! APPLICATION FI	LING INFORMATION IS PROVIDED ON THE	NEXT PAGE.
IMPORTANT! APPLICATION FI		NEXT PAGE.
WE ARE RETURNING YOUR APPLICATION		NEXT PAGE.
WE ARE RETURNING YOUR APPLICATION □ APPLICATION FEE NOT ENCLOSED □ ADDITIONAL SIGNATURES REQUIRED	ON FOR THE FOLLOWING REASON(S): MAP NOT INCLUDED or INCOMPLETE SECTION IS INCOMPLETE	
WE ARE RETURNING YOUR APPLICATION □ APPLICATION FEE NOT ENCLOSED □ ADDITIONAL SIGNATURES REQUIRED □ OTHER/EXPLANATION:	ON FOR THE FOLLOWING REASON(S): MAP NOT INCLUDED or INCOMPLETE SECTION IS INCOMPLETE	E

ATTACHMENT FOR APPLICATION FOR CHANGE

	SOURCE	I N()	1/4	1/4	SEC.	TWP.	RGE.	PARCEL#	WELL TAG #
		NO.	/-	/4	J.C.	1001.	NOL.	TAROLL#	WELL IAO
				9					
							1		
									41 44 17
-					-				
					 				
YOU O	WN THE ABOVE P	POINT(S) OF DIV	ERSION	MITHD	RAWAL?	YES	□ NO – IF	NO, PROVIDE OWNER	(S) NAME:
urpo	se(s) of Us		xistin						
	PURPOSE	OF USE	4	- 0	PM or CF	S ACE	RE-FT/YR	PERIOD (OF USE
		-							
lace	of Use - □	Existing		ropo:	sed:	ON OF LA	ANDS		
			-	10.00					
									The second secon
	1/4 SE	C. TWP.	RG	E.	C	OUNTY		PARCEL#	# OF ACRE
1/4									
1/4		1		- 1			1		
1/4							1-1		
1/4									
		DO IN ABOVE D	ACE OF	Hero (7 450 [7 NO "	E NO PROVI	DE OWNER(S) NAME:	